



**EFT-1**  
State Form 50110  
(R6 / 06-08)

Indiana Department of Revenue  
**Authorization Agreement Form**  
For Electronic Funds Transfer

Indiana Taxpayer ID #: \_\_\_\_\_ Date: \_\_\_\_\_  
**(Must Be 13 Digits)** See Special Instructions on Back.

Business Name: \_\_\_\_\_

Name and Telephone Number of Individual in your Organization that Revenue may contact regarding EFT

Contact Person: \_\_\_\_\_  
(Not a Bank contact) (Please print)

☐ EFT Required  
or  
☐ Voluntary

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_

**Please complete a separate form for each tax type selected.**

☐ Sales (RST)

☐ Financial Institution (FIT)

☐ Tire Fee (TIF)

☐ Utility Receipts Tax (URT)

☐ Withholding (WTH)

☐ Gasoline Distributors (MFT)

☐ Prepaid Sales on Gasoline (PPD)

☐ Special Fuel Tax (SFT)

☐ Corporate Income (COR)

☐ Streamlined Sales Tax (SST)

☐ Type II Gaming (TTG)

☐ Cigarette Tax (CIG)

*Please choose an EFT method. If you choose ACH Debit, you must also complete the banking information portion of this form, and attach a copy of a voided check to verify the banking information.*

☐ ACH Credit

☐ ACH Debit\* (Complete bank information)

Do not use this form to register for INtax. Visit  
[www.intax.in.gov](http://www.intax.in.gov)

Bank ABA#: \_\_\_\_\_  
(Transit Routing Number)

☐ Checking or ☐ Savings

Your Account #: \_\_\_\_\_  
(With the above bank)

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Date**

\*If ACH Debit is chosen, the taxpayer hereby authorizes the Indiana Department of Revenue to present debit entries into the bank account referenced above as required by Indiana Law. These debits will pertain only to Electronic Funds Transfer payments that the taxpayer has initiated.

**This form may be faxed or mailed.**  
Fax # ..... (317) 232-1851  
Questions? ..... (317) 232-5500

**EFT Section, Room N248, MS 103**  
**Indiana Department of Revenue**  
**100 N. Senate Ave.**  
**Indianapolis, IN 46204-2253**

## Completing the EFT-1 (Authorization Agreement)

**Indiana TID#** - Enter your 13 digit Indiana TID#. Your Indiana TID# is **not** your Federal ID#, with the exception of Corporate Income, Financial Institution, and Utility Receipts Taxes.

Taxpayers registering for EFT to remit Corporate Income, Financial Institution, or Utility Receipts Taxes will use their nine digit Federal ID# plus four additional digits at the end as assigned by the Department. If you do not know the last four digits, contact the EFT Section at (317) 232-5500, or only enter the nine digit number and we will provide the four additional digits required for EFT payments on your confirmation letter.

Other tax types will use a 13-digit number as assigned by the Department. Taxpayers registering for EFT to remit Retail Sales/Use Tax, Employers' Withholding Tax, or Prepaid Sales Tax on Gasoline can find the 13-digit number by referring to the account number printed on their tax payment coupons, minus the final (14th) digit.

**Streamlined Sales Tax EFT ID numbers** - EFT Taxpayer Identification for Streamlined Sales Taxpayer is the Streamlined Sales Account number assigned in the Streamlined Sales Registration. The Streamlined Sales identification number should be aligned to the left of the field, therefore the number would be 'S99999999'. The Certified Service Provider's (CSP) identification number can be used in the future when Indiana accepts the bulk payment from Certified Service Providers. The identification number would be formatted as "CSP9999999".

**Tax Type** - Please complete and submit a separate EFT-1 form for each tax type for which you are registering for EFT.

**Bank Information** - This section only needs to be completed by those taxpayers selecting the ACH Debit method. You must indicate whether the account is checking or savings. Remember the ABA/Transit routing number must be nine digits. **Note:** You cannot have multiple accounts for a single tax payment. Please verify the accuracy of the bank information entered.

**Taxpayer Contact** - Enter the name and entire address of the person who should be contacted with information concerning EFT tax payments, or if there is a problem with EFT payments. Do not enter the name of someone at your bank. We must have a taxpayer contact. Tax service providers may enter their contact information if they have power of attorney to represent the taxpayer. The contact telephone number must also be provided.

**Required or Voluntary** - Are you registering for EFT because you are required by law, or are you a voluntary participant in the EFT program?